



Sample Form (03-04)

**AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY**In re Application of:  
MATTES, et al.Application No.  
09/963,341Filed:  
September 24, 2001

Title: Alpha 1-Antitrypsin Preparation As Well As A Method For Producing The Same

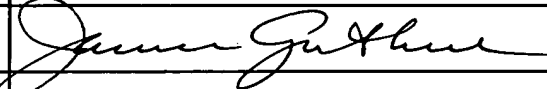
Attorney Docket No.  
P-204.00 CONArt Unit:  
1651

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

Name	Registration Number
Patrick S. Eagleman	44,665

**This is not a Power of Attorney to the above-named practitioner.** Accordingly, the practitioner named above does **not** have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.

## SIGNATURE of Practitioner of Record

Name  
Janice Guthrie, Ph.D.Signature  
Date  
July 15, 2004Registration  
Number 35,170Telephone  
949-474-6406

This form offers a sample or suggested format for an authorization of a practitioner who is not of record. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.